



Post-Recognition Monitoring Report

The Chartered Management Institute (CMI)

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Introduction

Regulating qualifications

The responsibility for regulating qualifications lies jointly with three regulators:

- Office of Qualifications and Examinations Regulation (Ofqual), the regulator for qualifications awarded in England and vocational qualifications awarded in Northern Ireland
- Department for Children, Education, Lifelong Learning and Skills (DCELLS), the regulator for Wales
- Council for the Curriculum, Examinations and Assessment (CCEA), the regulator responsible for qualifications (other than vocational qualifications) awarded in Northern Ireland.

We systematically monitor awarding organisations and their regulated qualifications against the requirements set out in the statutory regulations. The aim of this activity is to promote continuing improvement and public confidence in the quality of regulated qualifications.

Where an awarding organisation is found not to comply with relevant criteria, the regulators will identify areas of non-compliance that must be rectified within a certain period. Even if an awarding organisation is compliant, the monitoring team may provide observations on ways in which the awarding organisation could change its systems and procedures to improve clarity or reduce bureaucracy.

Instances of non-compliance and observations arising from this monitoring activity are specified at the end of each section of this report. Awarding organisations are required to produce an action plan to show how they will deal with any non-compliance issues identified. We will generally agree the action plan and monitor its implementation.

We will use the outcomes of monitoring and any subsequent action taken by awarding organisations to inform decisions on future monitoring and/or the possible imposition of sanctions.

Banked documents

As part of the awarding organisation recognition process, the regulators require awarding organisations to submit certain documents to Ofqual, to be held centrally. Information from these 'banked' documents is used to inform monitoring activities and may also affect an awarding organisation's risk rating.

A suite of documents has been identified as suitable for banking, consisting of those items considered to be the most crucial in supporting an awarding organisation's ability to operate effectively. To maintain the currency of the banked documents, awarding organisations are responsible for updating them as and when changes occur. They are also reminded to review them at least annually as part of the self-assessment return.

About this report

This report is the outcome of a monitoring activity on the Chartered Management Institute (CMI) awarding organisation that was carried out by Ofqual staff in August 2010. It draws together our findings on areas of:

- management and governance
- resources and expertise
- diversity and equality
- development of units and rules of combination (RoC) for qualifications
- unit/qualifications development – design and development of assessment
- delivery of assessment
- centre recognition
- awarding and certification

This is the first post-recognition monitoring activity on CMI in respect of the Qualifications and Credit Framework (QCF) since the awarding organisation received supplementary recognition in February 2010.

The monitoring activities included desk research of information already held by the regulators, examination of CMI's supplementary recognition application and scrutiny of the awarding organisation's website. We visited CMI's head office to conduct interviews with staff and review documentation, and we also attended an Independent Review Group meeting.

This report draws together our findings from these monitoring activities.

About CMI

CMI offers a range of qualifications that are designed to develop professional knowledge and understanding and to increase levels of competence across the areas of management and leadership. For further information about CMI and the qualifications it offers, visit its website at www.managers.org.uk.

Management and governance

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 2.1–2.3, 5.1 and 5.17.

Findings

1. The awarding organisation function within CMI is undergoing a period of transition and change. This follows the appointment of a new Head of Awarding Body who is reviewing all of the awarding organisations systems and procedures including those put in place to deal with the requirements of the Qualifications and Credit Framework (QCF). Future compliance with regulatory criteria is hugely dependent on the outcomes of the review, so it is therefore referred to throughout this report.
2. The single point of accountability remains the chief executive officer of the Institute, with day-to-day responsibility delegated to the head of awarding body.
3. CMI is made up of six areas of business including Business Solutions and product development; marketing and communications; membership and business development and the awarding body. The directors and head of awarding body report to the chief executive officer.
4. The Institute is governed by the board of trustees with committees of the board reporting to it. Each committee is chaired by a representative of the board of trustees. The work of the awarding organisation is currently reported through the membership development committee via a sub-committee called the approvals committee.
5. The review identified that the CMI committee and reporting structure did not sufficiently promote the work of the awarding organisation as it was subsumed within other areas of business. Therefore, it has been agreed that the approvals committee will become a full committee of the Board and will be known as the qualifications and approvals committee. The terms of reference are under development but the Qualifications and Approvals Committee will oversee the work of the awarding body and agree key decisions.
6. This change will be formally ratified at the annual general meeting in the autumn.
7. A further change has been the appointment of awarding body business development managers who work for the awarding organisation within the regional business development teams. Their role is to support potential centres through the approval process, but without the sales and marketing aspect. This again strengthens the identity and role of the awarding organisation within CMI.

8. The qualifications and fee structures are currently reviewed by the director of the business development team and the head of awarding body. CMI are aware that the existing pricing structure is overly complex and that there is no formal mechanism for reviewing fees. The structure and fee review process will be included in the wider awarding organisation review targeted specifically with looking at efficiency and value for money.

Non-compliance

There are no instances of non-compliance in relation to this section.

Observations

1. CMI are reminded to inform the regulators of changes to its organisation and management structure when these occur.
2. It was noted that although not looked at as part of this activity, the banked policy documents for the awarding body, including those for malpractice, enquiries and appeals, customer service and reasonable adjustments, were not evident on the website.

Resources and expertise

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 2.4–2.6, 3.1, 4.1, 5.2, 5.5 and 5.6e.

Findings

1. In addition to the head of awarding body, CMI has 11 staff dedicated to its regulated functions. These fall into two teams. One team is operational, dealing with approved centres and customers. The other is the quality team which is responsible for the development and assessment of units and qualifications.
2. All awarding body staff are subject to twelve- and six-month formal performance development reviews from which training and development needs are identified.
3. Additional staff development initiatives have taken place in the operations and customer service team. This included the regionalisation of the team to allow centres and other customers a specific point of contact within CMI. A training programme is being implemented whereby all members of the team are increasing their capacity and building up their expertise to enable them to cover for each other's roles where required. CMI is planning to take this approach across other teams.
4. The qualifications manager has attended Qualifications and Curriculum Development Agency and Federation of Awarding Body training events for the QCF and has used the guidance to work with the head of awarding body to develop RoC for qualifications. CMI should consider how it will cascade the knowledge and understanding of the QCF to other staff members. There is no defined job role that outlines the responsibilities for developing RoC.
5. CMI contracts specialists to provide the awarding organisation with expertise in the areas of unit development, design of assessment and delivery of assessment.
6. For its unit development, CMI uses a previously contracted external consultant. The contract does not include any defined specification for the role of Unit Writer, nor does it include details of the expertise required. It is not clear how the consultant obtained his expertise in unit writing.
7. A further person is contracted to write external assignment tasks. Again, there is no defined job specification for this work.
8. There is an over reliance on these two individuals, which could leave CMI vulnerable to having no expertise available to the organisation should they not be available when required. CMI must consider how it will ensure that it can

continue to meet the requirements of the QCF and maintain its capacity to develop units and assessments.

9. In its delivery of qualifications CMI has a team of seven regional chief verifiers, who externally verify a portfolio of centres, and are responsible for 54 external verifiers. The external verifiers have a broad range of responsibilities. These include assisting potential centres through the approval process; monitoring approved centres for continued compliance with CMI recognition conditions, including checking diversity and equality compliance; reviewing centre-devised assessment tasks; and sampling assessment decisions.
10. External Verifiers attend quarterly regional meetings with their chief verifier as well as attending two CMI national development days a year. At the April 2010 development meeting of external verifiers a range of new QCF units was available and the assessment guidance was discussed. However, the external verifiers have not been provided with sufficient training in the wider aspects of the QCF. For instance, they have to assess the quality of centres' systems for obtaining ULNs and recognising prior learning to maximise credit transfer and exemptions, but they have not had any training to ensure they have an understanding of what these terms mean.
11. The final group of specialists contracted by CMI are the team of chief assessors and assessors who are engaged to mark the CMI-devised unit assignments. The assessors have attended some of the external verifier training events as well as the meeting where units were discussed. However, there has been no additional training relating to the QCF.
12. The role and competence requirements expected of external verifiers and regional chief verifiers are outlined within the *External Verification Guide* (2009). Mention is also made of the roles of external assessor and chief assessor, but the qualifications and/or competence requirements are not defined. CMI must formalise its recruitment and training processes for the specialists it contracts with in order to ensure that it has the expertise required under the QCF.
13. CMI does not have any formalised, or tested, business continuity procedures. However, it is able to access systems remotely and has alternative offices in London. A dissemination list of emergency communications and actions is in place and all hard copy data is securely locked in cabinets within the building. The IT department has stringent security systems in place and there are policies for all IT systems in use. CMI's IT systems for its regulated functions are independent from other systems in use in the building with different levels of password protected security access. The IT system is backed up regularly with the tapes securely stored.

14. CMI staff stated that CMI as a whole works to an organisational risk register and that the awarding body is working towards the production of a risk register as part of the review of systems and procedures.

Non-compliance

1. CMI must ensure that, for the units and qualifications it offers, it has a human resource strategy and arrangements that provide for sufficient staff and/or associates to support current and future demand for its services.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 2.5)

2. CMI must ensure that its staff and associates have access to training and guidance on the design and development of units.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 3.1b)

3. CMI must ensure that its staff and associates have access to training and guidance on the design and development of RoC.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 4.1b)

4. CMI must have defined roles and responsibilities for all staff involved in the delivery of assessment.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.5)

Observations

There are no observations in relation to this section.

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Diversity and equality

This is subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 2.11–2.14.

Findings

1. CMI has clear policies in place regarding diversity and equality. All policies are produced and updated by the central human resources department and all departments, including the awarding organisation, are alerted to any changes.
2. Policies are reviewed each November and CMI staff members are informed of any changes to legislation.
3. Updates are also circulated to centres and external verifiers, normally through direct mailings or newsletters. However, no face-to-face training is carried out with the external verifiers, who are expected to monitor centres' compliance with diversity and equality legislation at each visit.
4. Diversity and equality issues are considered during the unit development process, including jargon, technical and language review to ensure there are no barriers, but this is not a formalised process, nor is it recorded or checked. Additionally, units are written in the context of a specific level and may be given to subject experts to review. Other than some informal learner testing, CMI does not carry out any formal consultations with learners in the development of units and qualifications.
5. Each unit is designed to give the centre the freedom to choose the most appropriate assessment method for the individual learner. However, there is no requirement for this determination to be documented.
6. While the needs of learners may be considered as part of the unit and RoC design stage, some unit assessment guidance seen by the monitoring team contained guidance which may cause confusion. For instance, 'You must submit your work as an electronic word document (.doc file)'. In practice CMI accepts work from learners submitted either electronically or in hard copy and there are no barriers to access.
7. Currently centre-devised assessments are monitored through external verifier visits and it is not clear how effective this review process is.
8. CMI currently collects data from its membership applications and from any previous assessment records. Additional learner information is collected, and recorded, at centre level. However, the data is limited and is not currently used to inform unit, RoC or qualification development.

9. While CMI does not have formalised procedures in place, it has recognised these issues and intends to integrate diversity and equality checks within the business case process for unit development.

Non-compliance

5. CMI must have systems in place to ensure that it considers equality for all learners in the development of units, RoC and qualifications.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 2.12)

6. CMI must ensure that it consults with learners and/or their representatives to ensure that there are no barriers to entry to the units and qualifications it offers.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 2.13)

Observations

3. The external verifiers' role covers a wide range of responsibilities; CMI should ensure that external verifiers are clear as to the requirements of equality, diversity and how to identify and mitigate against potential barriers to access so that they can check that these are considered by a centre devising its own unit assignments.

Development of units and RoC for qualifications

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 3.2, 4.2–4.3 a–f and 6.2a.

Findings

1. The existing CMI units placed on the QCF, during the tests and trials period, were developed prior to CMI's supplementary recognition. Therefore the processes that were followed were not those subsequently submitted as part of the recognition application; these processes have yet to be fully implemented.
2. Units to be developed are identified in a number of different ways. This can be in response to centres, industry needs or from a review of qualifications. There is evidence of CMI using some provision planning tools although it is not documented.
3. The unit writer receives a written specification from CMI for the development of a unit. The unit writer will carry out or commission research into the subject of the unit and where necessary consult with relevant experts. The unit writer may also consult learners.
4. While the unit writer is experienced in the creation of units and seeks advice from other experts where required, the development was carried out on an ad-hoc and informal basis. There are no records detailing the steps that were taken or decisions made. Therefore CMI has no audit trail to show how the unit was developed; and no way of ensuring consistency of development or of checking whether the development met the requirements of the regulatory criteria. There was evidence of new processes being developed, such as a business case template, but these have yet to be implemented.
5. The developed unit is then presented to the to the head of awarding body who, with the qualifications manager, assigns guided learning hours, level and credit. This process should be integral to the unit development rather than separate. If the Qualifications Manager is satisfied with the unit it is passed to the Independent Review Panel.
6. CMI has set up an Independent Review Panel specifically to meet the requirements of the QCF. At the time of the monitoring it was about to have its second meeting. The remit of the Independent Review Panel is to review units by checking that they meet the requirements of QCF section 1, including that the guided learning hours, level and credit are appropriate for the unit. Records of previous meetings show that the units are reviewed in detail and recommendations are made. However, at a meeting of the Independent Review Panel attended by a member of the Monitoring Team discussions on guided

learning hours and credit resulted in requests for further training and guidance on these areas, indicating that members had insufficient knowledge to make judgements. Further training on RoC is already planned to take place.

7. Although not clearly documented, the independent review panel is also responsible for unit sign-off. The role of the independent review panel is being considered as part of the wider review. CMI must ensure that the panel is utilised effectively and that the members are clear as to their role and have appropriate training so that they can carry out that role.
8. When the Independent Review Panel has signed off the unit it is submitted to the regulators' unit databank.
9. It is unclear whether CMI staff carry out any checks on the quality of the content prior to submission to the unit databank or whether there is any quality assurance check to ensure that CMI procedures have been followed.
10. The units are currently reviewed as part of CMI's qualification review system. Evidence from the delivery of assessment is taken into account. CMI has identified that it needs to consider unit review and is planning a calendar of events which will be based on individual unit review dates rather than whole qualification end dates. However, this is not yet in place. CMI needs to ensure it has a process of review to check the continued need for a unit and that the unit level and credit continues to be accurate.
11. In relation to RoC, CMI has again used an informal process to determine the rationale for the qualification. This procedure needs to be formalised to show how the combination of units supports the rationale and learner progress. The qualifications developed have been a mixture of SSC's and CMI's. The RoC process has been undertaken with other organisations where the qualifications have been owned by SSCs.
12. The development of a RoC is discussed by the qualifications manager and the unit writer. The mandatory and optional units are agreed for qualifications. This is insufficient as CMI is required to have procedures in place to interrogate the unit databank, to ensure that the design feature of section 1 are met and to consider maximising the opportunity for credit accumulation and transfer.
13. RoC may also be sent to industry subject experts for their professional opinion on the structure of core and optional units. Although not a regulatory requirement this is good practice. However, this would be enhanced if documented.
14. Another area of good practice is that a list of exemptions is available for centres and CMI is able to offer a mapping service at an additional charge.

15. The RoC is initially reviewed by the quality assurance manager before going to the independent review panel. It is then sent to the approvals committee for final sign-off.
16. New RoC/qualifications and changes to RoC/qualifications are approved by the independent review panel who may call in expertise as required. The panel will check that the RoC meets QCF requirements. The RoC is then signed-off by the approvals committee.
17. CMI does not have a procedure to review the need for the RoC; ensure that it continues to comply with the design features of section 1; or check that the combination of units and opportunities for credit accumulation, transfer and exemption are consistent with the rationale for the qualification.
18. CMI intends to include the rationale for the qualification in a business case that is signed off by the Head of Awarding Body before RoC development begins.

Non-compliance

7. CMI must have formal procedures in place for its unit development. These must show how the need for the unit was identified; that it has interrogated the unit databank; how the requirements of QCF section 1 are covered; and how the level and credit are determined.

(Regulatory arrangements for the qualifications and credit framework (2008), criteria 3.2 a–g)

8. CMI must have procedures in place to review the continued need for a unit.

(Regulatory arrangements for the qualifications and credit framework 2008, criteria 3.3 a–d)

9. CMI must ensure that expertise is used appropriately in the development of units.

(Regulatory arrangements for the qualifications and credit framework (2008), criteria 3.1d)

10. CMI must have formal procedures in place for the development of RoC. These must show that it has interrogated the unit databank to establish the units required; how the requirements of QCF section 1 are covered; and how the RoC will maximise opportunities for credit accumulation and transfer.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 4.3 a–g)

11. CMI must have procedures in place to review the continued need for a RoC.

*(Regulatory Arrangements for the Qualifications and Credit Framework (2008),
criteria 3.3 a–d)*

Observations

There are no observations in relation to this section.

Design and development of assessment

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 5.3 a–g, 5.4 and 5.16a.

Findings

1. All of CMI's core qualifications, for example those in management and leadership, levels 3–7, have an external assignment for each unit. CMI designs and develops the majority of external assignments that are used by centres. However, the CMI centre recognition process allows centres the flexibility to choose whether they use CMI-devised tasks or develop their own. Registered centres only use CMI assessment tasks. Approved centres can choose either to use CMI tasks or to develop their own. Checks are carried out in the centre recognition process to ensure the centre has the expertise and resources to produce assessments.
2. The external verifier will review centre-devised assessments against the learning outcomes. It is not clear what other criteria are used to check assessments, other than professional judgement. The CMI review has identified that this is a weakness and CMI intends to change this process to allow the head of awarding body to approve centre-devised assessments.
3. The CMI assignments are written by one person. The assignments are developed alongside a mark scheme and guidance. Assignments follow the unit format for learning outcome and assessment criteria.
4. CMI assignments were signed off by the previous head of awarding body but currently, apart from the external verifier's sign-off of learning outcomes, there is no independent review, checking or sign-off process in place. CMI has identified this and intends that the review of CMI-devised assessments will be included in the revised terms of reference for the independent review panel.
5. The CMI process used to design and develop assessments is insufficient to meet regulatory requirements. The procedure should seek to ensure that the proposed unit assessment methods are consistent with QCF section 1; enable units to be assessed individually; allow the learning outcomes to be met; and are cost-effective.
6. CMI is also required to have a process in place to review the procedure and, for the design and development of assessment, to ensure that all arrangements continue to meet regulatory requirements.

Non-compliance

12. CMI must have procedures in place to develop assessment methods for individual units that meet regulatory requirements.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.3 a–g)

13. CMI must have procedures in place to review its arrangements for designing and developing assessment methods and ensure continued compliance with regulatory requirements.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.16a)

Observations

There are no observations in relation to this section.

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Delivery of assessment

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 5.5–5.6, 5.9–5.10, 5.16b and 5.20–23.

Findings

1. The specifications for each qualification are available on the website as centre assessment guidance documents. These documents include some incorrect information and refer to other documents that are not currently available. For example, the centre assessment guidance for Level 5 Management and Leadership (QCF) states that information on credit accumulation and transfer will be available on the CMI website, which it is not. The document also refers to the CMI Centre Code of Practice as having a process for recording recognition of prior learning. This document is not currently available.
2. The external assignments written by CMI are supported by additional guidance for candidates. A member of the monitoring team attended a meeting of the Independent Review Panel, which looked at guidance for some new CMI units. The meeting noted that the guidance was poorly written, conflicts with the centre assessment guidance and could cause confusion for candidates. This confirms the findings in the previous section of this report in relation to the lack of checking or sign-off of external assignments.
3. CMI must put in place measures to ensure that the advice provided to candidates is consistent.
4. Once completed, the CMI set and marked tasks are submitted and allocated to a bank of external assessors. Candidates that do not achieve a pass are referred to a moderator for remarking. Candidates are allowed up to three attempts to achieve a pass.
5. The external assessors attended the external verifier QCF training event and have their own assessor training days and standardisation events. They are managed by Chief Assessors who sample marked assignments.
6. For the centre-devised assessments the internal assessor and verifier marks the work, which is then sampled by the external verifier. The qualifications and competence of assessors and Internal Verifiers are checked at centre recognition. However, the roles of centre assessors and Verifiers are not currently published.
7. External verifiers attend three regional standardisation events a year. These events cover assignment writing, assessment and standardisation. The standardisation of assessments takes place regionally to ensure consistency

between centres. External Verifiers also attend two national development days year to standardise practice across regions.

8. External verifier reports are read by a member of CMI staff who produces monthly reports. Although this 'monitoring' identifies trends at centres, other information gained from them is not used to inform external verifier performance. CMI must introduce performance management systems for all staff involved in assessment, including external verifiers.
9. Regional chief verifiers meet with their regional external verifier teams quarterly and also attend the national development days to support external verifiers and centres. Chief verifiers' produce annual reports that are signed off by the head of awarding body.
10. All chief verifiers' reports are reviewed by a consultant who looks at assessments across the regions. However, although the QCF is new, CMI must consider how it will use this information to ensure that standards are comparable year-on-year. CMI needs to have a process in place to compare standards over time.
11. CMI does not have a process for the review of its procedures for the delivery of assessment.

Non-compliance

14. CMI must ensure that assessment tasks and associated guidance are produced to the required quality standards.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.6a)

15. CMI must have performance management systems in place to evaluate the effectiveness of people involved in assessment.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.6f)

16. CMI must have procedures in place to ensure that standards are comparable year-on-year, across centres, units and qualifications at the same level with the same title and where identical units are assessed using different assessment methods.

(Regulatory Arrangements for the Qualifications and Credit Framework (2008), criteria 5.16d)

Observations

There are no observations in relation to this section.

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Centre recognition

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 5.11, 5.16b and 5.18.

Findings

1. Potential centres make an initial enquiry through the awarding body. The enquiry is then forwarded to the business development manager who validates the enquiry. It is passed to the appropriate region where an awarding body business development manager will work with the centre to reach approval.
2. An advisor is allocated who will visit the centre and will become their external verifier once approved. Centres are also provided with access to the secure part of the website known as the HUB, which holds guidance and information to assist them in their application.
3. Potential centres can submit evidence to meet the approval criteria in stages for their external verifier to review. Once the centre has submitted sufficient evidence the approval application is signed-off by the external advisor and the regional chief verifier, with a final sign-off by the head of awarding body.
4. CMI has recently reviewed its centre recognition arrangements against the QCF criteria and is about to implement a new web-based approval system. For instance, the recognition criteria now includes a space for the candidate's ULN and centres are required to have systems to support credit transfer, accumulation and exemptions.
5. Currently CMI expects external verifiers to carry out monitoring visits to each centre at least three times a year to ensure ongoing compliance and to sample assessments. CMI uses a web-based reporting system to manage and report on these visits. External verifiers produce a centre report for each centre. The external verifier centre monitoring reports are reviewed by CMI's quality team.
6. The monitoring team were able to view CMI's database for storing centre information and candidate progress tracking. It was comprehensive, including details of centre staff and the qualifications they were approved to deliver for the centres. The system prevents any awards being made beyond those that they are approved to deliver.
7. The candidate registration and progress tracking is systematic and there are also checks and balances built in to the system to mitigate errors or mistaken claims for certificates.

8. A formal process for the ongoing review of CMI's centre recognition arrangements is to be considered as part of the awarding body review.

Non-compliance

There are no instances of non-compliance in relation to this section.

Observations

4. Although CMI has recently reviewed its centre approval arrangements to meet the requirements of the QCF, consideration must be given to putting in place a procedure for ongoing review of these arrangements.

Awarding and certification

Subject to the *Regulatory Arrangements for the Qualifications and Credit Framework* (2008), paragraphs 5.12–5.15, 5.16 c–d and 5.19.

Findings

1. Candidates have to demonstrate that they have met all the learning outcomes for all the required units in order to achieve a CMI qualification.
2. For centre-devised assessments the evidence is assessed and internally verified before being sampled by the external verifier. Once the external verifier is satisfied, confirmation of achievement is completed electronically, triggering a certificate claim.
3. The CMI customer service target allows for 25 days from external verifier sign-off to certificate issue, although in practice this usually takes a few days.
4. The CMI database incorporates checks that ensure the correct amount of credits have been awarded, that there are the right number of units, and that the learning outcomes have been achieved. The system also checks the RoC for the qualification prior to printing a certificate.
5. Having the appropriate checks and balances built into the computer system ensures that the quality assurance processes required under the QCF are fully met.
6. CMI certificates are printed in-house in a secure print area with stocks of blank certificates stored in a locked cupboard. Samples of printed certificates are checked by CMI staff for any obvious errors before issue

Non-compliance

There are no instances of non-compliance in relation to this section.

Observations

There are no observations in relation to this section.

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